2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011638

Entity Name: HOME CARE BY GULF COAST VILLAGE, INC.

FILED Mar 28, 2018 **Secretary of State** CC5956377671

Current Principal Place of Business:

1435 SANTA BARBARA BLVD UNIT 1

CAPE CORAL, FL 33991

Current Mailing Address:

1435 SANTA BARBARA BLVD UNIT 1 CAPE CORAL, FL 33991 US

FEI Number: 26-1774290 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESKIN, HAROLD S 1420 SE 47TH ST CAPE CORAL, FL 33904 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

PRESIDENT Title Title **SCTY**

Name KING, MICHAEL Name MOORE, CAROL 1660 DUKE ST. 635 FIRST STREET Address Address ALEXANDRIA VA 22314 City-State-Zip: ALEXANDRIA WV 22314 City-State-Zip:

Title Т Title **CHAIRMAN**

KIKUMOTO, C. DAVID Name FELDMAN, NANCY Name

500 STINSON BLVD., NE Address 5299 DTC BLVD. Address

425

City-State-Zip: MINNEAPOLIS MN 55413 City-State-Zip: GREENWOOD VILLAGE CO 80111

Title VC Title DIRECTOR

Name MORLAND, JOHN COOPER, WILL Name Address 3161 N. 20TH ST.

Address 17782 SKY PARK CIRCLE City-State-Zip: ARLINGTON VA 22201

City-State-Zip: IRVINE CA 92614

Title **DIRECTOR** Title **DIRECTOR**

Name SULLIVAN, MICHAEL Address 3010 P STREET, NW

Address 12517 AVONDALE RIDGE DR

WASHINGTON DC 20007 City-State-Zip: City-State-Zip: FT. WORTH TX 76179

Continues on page 2

SCHNARE, ANN B.

Name

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/28/2018 AST SIGNATURE: KEVIN AHMADI

Officer/Director Detail Continued:

Title ASST. SECRETARY

Name KELLER, ROBIN

Address 1660 DUKE ST.

City-State-Zip: ALEXANDRIA VA 22314

Title AS/T

Name BUDZYNSKI, JOE Address 1660 DUKE ST.

City-State-Zip: ALEXANDRIA VA 22314

Title AS/T

Name PERRY, DEBORAH

Address 7530 MARKET PLACE DR.

City-State-Zip: EDEN PRAIRIE MN 55344

Title AST

Name AHMADI, KEVIN

Address 1333 SANTA BARBARA BLVD

City-State-Zip: CAPE CORAL FL 33991

Title DIRECTOR

Name WAKEFIELD, STEVE
Address 700 N. PEARL ST.
City-State-Zip: DALLAS TX 75201

Title DIRECTOR

Name EDEBURN, ANDY

Address 29 NORTH WACKER DR.

1010

City-State-Zip: CHICAGO IL 60606

Title DIRECTOR

Name BURKS, JANE W

Address 3930 1/2 BROWNSBORO RD

City-State-Zip: LOUISVILLE KY 40207

Title D

Name ARNOLD, PATTI ANDREINI

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991

Title D

Name KNAPP, KEITH

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991

Title D

Name DOLAN, THOMAS

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991

Title AS/T

Name GAVIN, NANCY

Address 7530 MARKET PL. CR.
City-State-Zip: EDEN PRAIRIE MN 55344

Title ASST. SECRETARY
Name SHERIDAN, PATRICK
Address 1660 DUKE ST.

City-State-Zip: ALEXANDRIA VA 22314

Title AST

Name TURNBULL, THOMAS
Address 1660 DUKE STREET
City-State-Zip: ALEXANDRIA VA 22314

Title DIRECTOR

Name DALE , KAREN M.
Address 1120 VERMONT AVE

2ND FLOOR

City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR

Name CARRINGTON, EDWINA
Address 404 CEDAR OAK DR.
City-State-Zip: AUSTIN TX 78746

Title DIRECTOR

Name LEBLANC, JAMES

Address 4152 CANAL ST

City-State-Zip: NEW ORLEANS LA 70119

Title D

Name BLOOM, SHAWN

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991

Title D

Name RASE, NANCY

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991

Title D

Name PETERSON, JEANNE

Address 1435 SANTA BARBARA BLVD

UNIT 1

City-State-Zip: CAPE CORAL FL 33991